

## REMARKS

This Response is to the Office Action of June 10, 2008. Claims 1 and 3 to 6 are currently pending in the application. Claim 2 was previously canceled. Applicants submit herewith a Request for Continued Examination. Please charge Deposit Account No. 02-1818 for the Request for Continued Examination and any other amounts due.

Claims 1 and 3 to 6 have been rejected under 35 U.S.C. § 102(e) as being anticipated by *Engelson*. Applicants respectfully submit that the claims as presently presented are patentable over *Engelson*. Independent claim 1 as presently presented and independent claim 5 each provide, in part, a handheld computing device reading prescribed medication data and medication delivery instruction from a first label. Claims 1 and 5 also provide, in part, the handheld computing device *comparing the prescribed medication data to the patient data and confirming a match between the prescribed medication data and the patient data*. Claims 1 and 5 also provide, in part, *the handheld computing device communicating and downloading the medication delivery instruction to a medication delivery device to deliver medication to the patient*. *Engelson* fails to disclose at least these elements of claims 1 and 5.

*Engelson* generally discloses a care management system including a barcode reader that reads a barcode 175 on a patient ID bracelet and a barcode 182 on a drug container. See *Engelson*, column 13, lines 25-32. The information on the barcode 182 of the drug container, however, is not communicated and downloaded to the medical delivery device. Instead, the information from the drug container is analyzed by a medication administration management software module 110 to determine whether there is a discrepancy between the information read and pre-stored information. See *Engelson*, column 13, lines 49-60. When the medication administration management software module 110 completes its analysis, the care management system automatically downloads information consisting of configuration parameters from the pharmacy CPU into a local area network into the bedside CPU and then into the medical delivery device. See, *Engelson*, column 14, lines 4-13.

*Engelson* discloses a portable computer 235. However, *Engelson* does not teach or suggest that the portable computer is used to perform the claimed step of comparing the prescribed medication data to the patient data and confirming a match. Instead, *Engelson* discloses that the step of comparing prescription data to patient data is performed by the medical

administration management module: “[t]he data obtained then is analyzed by the medication administration management module 110.” See col. 13, lines 49-50. Nowhere does *Engelson* suggest that the handheld computer performs this comparing function.

Additionally, *Engelson* does not disclose a handheld computing device communicating and downloading the medication delivery instruction to a medication delivery device to deliver the medication to the patient. Instead, *Engelson* discloses that the medication delivery instructions are downloaded by the bedside CPU: “the care management system automatically downloads information consisting of the appropriate configuration parameters for the infusion *from the pharmacy CPU* 60 through the local area network 50 into the bedside CPU 80 and then into the infusion pump 92.” Col. 14, lines 7-11 [emphasis added]. In claim 1, for example, the first label includes data on the prescribed medication *and* instruction of delivering the medication. In step (g) of claim 1, the medication delivery instruction is the instruction *from the first label*, *not* from a pharmacy CPU. Thus, the claimed method enables an entirely *localized* process in which all steps are performed at one location. When practicing the claimed method, there is no need to access a central computer system to access medication delivery instructions, as such information is on the first label and provided to the medication delivery device *by the handheld device*. Nowhere does *Engelson* disclose that a portable computer or any handheld device is used to read medication delivery instructions *from a label* also including medication data and download the instructions to a medication delivery device. The *source* of the medication delivery instructions in claims 1 and 5 is entirely different than that in *Engelson*. For at least these reasons, Applicants respectfully request that the rejection of claims 1 and 5 under 35 U.S.C. § 102(e) over *Engelson* be withdrawn.

Claims 3 and 4 depend from claim 1 and include all of the limitations of claim 1. Accordingly, the patentability of each of these claims flows from the patentability of claim 1. Applicants, therefore, respectfully request the rejections of Claims 3 and 4 under 35 U.S.C. § 102(e) over *Engelson* be withdrawn for at least the reasons provided above for Claim 1.

Independent claim 6 as presently presented provides, in part, a comparing the medication data to the patient data by a handheld computing device. Claim 6 also provides, in part, the handheld computing device confirming a match between the data and communicating and

communicating and downloading the medication delivery instruction to a medication delivery device. *Engelson* fails to disclose at least these elements of claim 6.

As discussed above, *Engelson* does not disclose a handheld device used to compare the medication data to the patient data. Further, *Engelson* does not disclose a handheld computing device confirming a match between the data and communicating and downloading the medication delivery instruction to a medication delivery device to deliver the medication to the patient. In *Engelson*, the delivery instructions for the medical device are separate and apart from the information read from the barcode 182 on the drug container. In claim 6, the medication delivery instructions are those read by the handheld device *from the first label*. As such, *Engelson* does not disclose means for reading a medication delivery instruction from a first label and the handheld computing device communicating and downloading the medication delivery instruction to a medication delivery device as called for in independent claim 6. Applicants therefore respectfully request that the rejection of claim 6 under 35 U.S.C. § 102(e) over *Engelson* be withdrawn.

Applicants respectfully submit that this case should be in condition for allowance. Examiner is invited to contact the undersigned Attorney for the Applicants via telephone if such communication would expedite the allowance of this application.

Respectfully submitted,

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